STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS AND MINING					FORM 3 AMENDED REPORT			
APPLICATION FOR PERMIT TO DRILL					1. WELL NAME and NUMBER Threemile 12-7			
2. TYPE OF WORK DRILL NEW WELL REENTER P&A WELL DEEPEN WELL					3. FIELD OR WILDCAT HATCH POINT			
4. TYPE OF WELL Oil Well Coalbed Methane Well: NO					5. UNIT or COMMUNITIZATION AGREEMENT NAME THREEMILE			
6. NAME OF OPERATOR STONE ENERGY CORPORATION					7. OPERATOR PHONE 337 237-0410			
8. ADDRESS OF OPERATOR 625 East Kaliste Saloom Rd, Lafayette, LA, 70508					9. OPERATOR E-MAIL WenzelJF@StoneEnergy.com			
10. MINERAL LEASE NUMBER (FEDERAL ANDIAN OR STATE)				12. SURFACE OWNERSHIP				
UTU-76580 FEDERAL INDIAN) FEE (0 0 0 0			
13. NAME OF SURFACE OWNER (if box 12 = 'fee')					14. SURFACE OWNER PHONE (if box 12 = 'fee')			
15. ADDRESS OF SURFACE OWNER (if box 12 = 'fee')					16. SURFACE OWNER E-MAIL (if box 12 = 'fee')			
17. INDIAN ALLOTTEE OR TRIBE NAME (if box 12 = 'INDIAN')		AS. INTEND TO COM MULTIPLE FORMATI YES (Submit Co		-	VERTICAL DIRECTIONAL HORIZONTAL			
20. LOCATION OF WELL	FOO	TAGES	QTR-QTR	SECTION	TOWNSHIP	RANGE	MERIDIAN	
LOCATION AT SURFACE 2140 FSL 19		1925 FEL	NWSE	12	29.0 S	21.0 E	S	
Top of Uppermost Producing Zone 2140 FS		1925 FEL	NWSE	12	29.0 S	21.0 E	S	
At Total Depth 2140 FSL 1925		1925 FEL	NWSE	12	29.0 S	21.0 E	S	
21. COUNTY SAN JUAN	22. DISTANCE TO NE	DISTANCE TO NEAREST LEASE LINE (Feet) 1925			23. NUMBER OF ACRES IN DRILLING UNIT			
	25. DISTANCE TO NEAREST WELL IN SAME POOL (Applied For Drilling or Completed) 7200			26. PROPOSED DEPTH MD: 11184 TVD: 7670				
27. ELEVATION - GROUND LEVEL 6189		28. BOND NUMBER RLB0005762			29. SOURCE OF DRILLING WATER / WATER RIGHTS APPROVAL NUMBER IF APPLICABLE 05-6 (Charles Hardison Redd)			
(1.250007.02								
		AT	TACHMENTS					
VERIFY THE FOLLOWING ARE ATTACHED IN ACCORDANCE WITH THE UTAH OIL AND GAS CONSERVATION GENERAL RULES								
WELL PLAT OR MAP PREPARED BY LICENSED SURVEYOR OR ENGINEER				COMPLETE DRILLING PLAN				
AFFIDAVIT OF STATUS OF SURFACE OWNER AGREEMENT (IF FEE SURFACE)				FORM 5. IF OPERATOR IS OTHER THAN THE LEASE OWNER				
DIRECTIONAL SURVEY PLAN (IF DIRECTIONALLY OR HORIZONTALLY DRILLED)				TOPOGRAPHICAL MAP				
NAME Don Hamilton	TITLE Agent	TITLE Agent F			PHONE 435 719-2018			
SIGNATURE	DATE 07/09/	DATE 07/09/2010 E			EMAIL starpoint@etv.net			
API NUMBER ASSIGNED 43037500010000	APPROVAL	APPROVAL			Bacqill			
					Permit Manager			